

# **Session I: Creating Institutional Structures for Community Level IPM**

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# The Vector Control Paradigm

- Reducing contact between vectors and people reduces transmission of pathogens, and thus reduces human disease
- Disease vectors cross property lines, and are therefore community problems
- While repellents and other individual actions can help, they are rarely enough to stop disease outbreaks

# The Vector Control Paradigm (II)

- Protecting communities from vectors and vector-borne diseases often requires community-wide integrated action
- Vector eradication is rarely possible, but effective vector control can reduce disease
- Integrated Vector Management (IVM) uses surveillance, exclusion, and biological and chemical control tools as appropriate

# Learning from Mosquito Control

- For over 100 years, publicly funded vector control programs, using chemical and non-chemical tools, have protected us from mosquito-borne diseases such as malaria, yellow fever, and West Nile Virus.
- Can this model work to protect us from Lyme Disease and other tick-borne diseases?

# Major Questions

1. Do we know enough to recommend vector control by local governments as a strategy to reduce the risk of Lyme and other tick-borne diseases? In what conditions?

# Major Questions

2. What needs to be done to develop, evaluate, and promote these recommendations? Who will do this?
3. What research is needed to determine which control options will be cost-effective in which conditions? How should we measure effectiveness?